## **Application Data Sheet**

## **Application Information** Application number:: Filing Date:: Regular Application Type:: Utility Subject Matter:: Suggested classification:: Suggested Group Art Unit:: CD-ROM or CD-R??:: Number of CD disks:: Number of copies of CDs:: Sequence Submission:: Computer Readable Form (CRF)?:: Number of copies of CRF:: Title:: RECORDING DEVICE AND MOVING PICTURE RECORDING DEVICE WITH **CAMERA** 16869P-079100US **Attorney Docket Number::** Request for Early Publication:: No Request for Non-Publication:: No Suggested Drawing Figure:: **Total Drawing Sheets::** 5 Small Entity?:: No Latin name:: Variety denomination name:: Petition included?:: No Petition Type:: Licensed US Govt. Agency:: **Contract or Grant Numbers One::**

No

Secrecy Order in Parent Appl.::

## **Applicant Information**

Applicant Authority Type:: Inventor

Primary Citizenship Country:: Japan

Status:: Full Capacity

Given Name:: Masataka

Middle Name::

Family Name:: Ota

Name Suffix::

City of Residence:: Yokohama

State or Province of Residence::

Country of Residence:: Japan

Street of Mailing Address:: New Marunouchi Bldg., 5-1

Postal Address Line Two:: Marunouchi 1-chome

Postal Address Line Three:: Chiyoda-ku

City of Mailing Address:: Tokyo

State or Province of mailing address::

Country of mailing address:: Japan

Postal or Zip Code of mailing address:: 100-8220

Applicant Authority Type:: Inventor

Primary Citizenship Country:: Japan

Status:: Full Capacity

Given Name:: Hajime

Middle Name::

Family Name:: Akutsu

Name Suffix::

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State or Province of Residence::

Country of Residence:: Japan

Street of Mailing Address:: New Marunouchi Bldg., 5-1

Postal Address Line Two:: Marunouchi 1-chome

Postal Address Line Three:: Chiyoda-ku

City of Mailing Address:: Tokyo

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State or Province of mailing address::

Country of mailing address:: Japan

Postal or Zip Code of mailing address:: 100-8220

**Correspondence Information** 

Correspondence Customer Number:: 20350

**Representative Information** 

Representative Customer Number:: 20350

**Domestic Priority Information** 

Application:: Continuity Type:: Parent Application:: Parent Filing Date::

**Foreign Priority Information** 

Country:: Application number:: Filing Date::

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**Assignee Information** 

Assignee Name::

Street of mailing address::

City of mailing address::

State or Province of mailing address::

Country of mailing address::

Postal or Zip Code of mailing address::